

County: Grant
SOUTHWEST HEALTH CENTER NURSING HOME
808 SOUTH WASHINGTON STREET

Facility ID: 8620

Page 1

CUBA CITY 53807 Phone: (608) 744-2161

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/00): 94

Total Licensed Bed Capacity (12/31/00): 94

Number of Residents on 12/31/00: 79

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Average Daily Census:

Nonprofit Church-Related

Skilled

Yes

Yes

87

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	22.8	
Supp. Home Care-Personal Care	No					1 - 4 Years	44.3	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.8	More Than 4 Years	32.9	
Day Services	No	Mental Illness (Org./Psy)	22.8	65 - 74	1.3			
Respite Care	Yes	Mental Illness (Other)	5.1	75 - 84	36.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	48.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	11.4	95 & Over	10.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	5.1			Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	5.1		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	12.7	65 & Over	96.2	-----		
Transportation	No	Cerebrovascular	8.9			RNs	12.2	
Referral Service	No	Diabetes	2.5	Sex	%	LPNs	7.2	
Other Services	Yes	Respiratory	5.1			Nursing Assistants		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	21.5	Male	29.1	Aides & Orderlies		
Provide Day Programming for Developmentally Disabled	No		100.0	Female	70.9	38.4		
					100.0	-----		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	3	4.9	\$117.88	0	0.0	\$0.00	1	5.9	\$145.00	0	0.0	\$0.00	4	5.1%
Skilled Care	1	100.0	\$145.00	54	88.5	\$101.24	0	0.0	\$0.00	15	88.2	\$132.65	0	0.0	\$0.00	70	88.6%
Intermediate	---	---	---	4	6.6	\$84.30	0	0.0	\$0.00	1	5.9	\$120.00	0	0.0	\$0.00	5	6.3%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	1	100.0		61	100.0		0	0.0		17	100.0		0	0.0		79	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	% Independent	One Or Two Staff		
Private Home/No Home Health	9.0	Daily Living (ADL)				
Private Home/With Home Health	4.5	Bathing	5.1	65.8	29.1	79
Other Nursing Homes	4.5	Dressing	11.4	60.8	27.8	79
Acute Care Hospitals	64.2	Transferring	25.3	54.4	20.3	79
Psych. Hosp. -MR/DD Facilities	10.4	Toilet Use	20.3	57.0	22.8	79
Rehabilitation Hospitals	0.0	Eating	77.2	12.7	10.1	79
Other Locations	7.5	*****				
Total Number of Admissions	67	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter		6.3	Receiving Respiratory Care	20.3
Private Home/No Home Health	10.5	Occ/Freq. Incontinent of Bladder		58.2	Receiving Tracheostomy Care	1.3
Private Home/With Home Health	31.6	Occ/Freq. Incontinent of Bowel		44.3	Receiving Suctioning	1.3
Other Nursing Homes	6.6				Receiving Ostomy Care	0.0
Acute Care Hospitals	7.9	Mobility			Receiving Tube Feeding	1.3
Psych. Hosp. -MR/DD Facilities	3.9	Physically Restrained		11.4	Receiving Mechanically Altered Diets	24.1
Rehabilitation Hospitals	0.0					
Other Locations	7.9	Skin Care			Other Resident Characteristics	
Deaths	31.6	With Pressure Sores		3.8	Have Advance Directives	98.7
Total Number of Discharges		With Rashes		0.0	Medications	
(Including Deaths)	76				Receiving Psychoactive Drugs	64.6

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	92.6	87.5	1.06	84.5	1.09
Current Residents from In-County	54.4	83.6	0.65	77.5	0.70
Admissions from In-County, Still Residing	19.4	14.5	1.34	21.5	0.90
Admissions/Average Daily Census	77.0	194.5	0.40	124.3	0.62
Discharges/Average Daily Census	87.4	199.6	0.44	126.1	0.69
Discharges To Private Residence/Average Daily Census	36.8	102.6	0.36	49.9	0.74
Residents Receiving Skilled Care	93.7	91.2	1.03	83.3	1.12
Residents Aged 65 and Older	96.2	91.8	1.05	87.7	1.10
Title 19 (Medicaid) Funded Residents	77.2	66.7	1.16	69.0	1.12
Private Pay Funded Residents	21.5	23.3	0.92	22.6	0.95
Developmentally Disabled Residents	0.0	1.4	0.00	7.6	0.00
Mentally Ill Residents	27.8	30.6	0.91	33.3	0.84
General Medical Service Residents	21.5	19.2	1.12	18.4	1.17
Impaired ADL (Mean) *	47.3	51.6	0.92	49.4	0.96
Psychological Problems	64.6	52.8	1.22	50.1	1.29
Nursing Care Required (Mean) *	6.5	7.8	0.83	7.2	0.91